U.S. Department of Housing and Urban Development Office of Residential Care Facilities

Public reporting burden for this collection of information is estimated to average 0.5 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation which must be submitted to HUD for approval, and is necessary to ensure that viable projects are developed and maintained. The Department will use this information to determine if properties meet HUD requirements with respect to development, operation and/or asset management, as well as ensuring the continued marketability of the properties. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Warning: Any person who knowingly presents a false, fictitious, or fraudulent statement or claim in a matter within the jurisdiction of the U.S. Department of Housing and Urban Development is subject to criminal penalties, civil liability, and administrative sanctions.

Financial Statement Certification

For use on all Financial Statements on ORCF Projects

Project: Project Name

FHA Project Number: Project Number

I, the undersigned, HEREBY CERTIFY that the figures and statements attached hereto submitted by me for the purpose of obtaining mortgage insurance under Section ______ of the National Housing Act are true and give a correct showing of ______ [Entity Name] financial position as of date of the financial statement.

I also certify that there \Box IS \Box is NOT financing encumbering the accounts receivable of this entity.

Executed this ______ day of ______, 20_____.

By:

Signature

(Printed Name & Title)

This instrument has been made, presented, and delivered for the purpose of influencing an official action of HUD in insuring a loan, and may be relied upon by HUD as a true statement of the facts contained herein.